RESOURCE CONSERVATION AND RECOVERY INFORMATION SYSTEM MAINTENANCE FORM FOR EPA NOTIFICATION

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City/10wii		II. OWNERSH		
Name of Legal O				
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City/Town	8		State	Zip
			Land Type	Owner Type
Phone # ()	2017	X. WASTE CO		
Delete O	Id Waste Codes	A. WADIE CO		Waste Codes
Detere O	W 17231E COUCS			
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1				

		VIII A. Hazardous Wa	aste Activity	
		<u>Type</u>	RCRA Reg. Status	RCRA Reg. Desc.
l. 2. 3. ·	Generator Transporter TSD	<u>N</u> .	N	2
	Mode of Transpo	ortation for Transporter Rail Highway	Water	Other
4.	\mathbf{X} .	Boiler and/or Industrial F BIF only; Smelter Deferra BIF only; Small Quantity Not a Burner/Blender, Ve	il. Exemption Claimed rified.	
a.	HWF Marketing X	to Burner: Code indicates that the E- burners of hazardous was:	landler is a generat te fuel activities.	or engaged in marketing
ъ.	HWF Other Ma	Code indicates that the E marketing activities other	fandler is engaged in than generator man	n hazardous waste fuei keting to burner.
c.	HWF Boiler/Ind B X	ustrial Furnace: Boiler and/or Industrial F Indication of Activity.	urnace (BIF) only.	
5.	Underground In X	jection Control: Code indicates that the I disposes of hazardous was installation.	Handler generates as ste and has an injec	nd/or treats, stores, or ction well located at the
	÷	VIII B. Used Oil Hecy	cling Activities	
1.	Used Oil Recvo	ling Activities	·• •	
a.	Used Oil Marke X	eter to Burner: Marketer directs shipments	s of used oil to burner	13.
·b.	Used Oil Other X	Marketer: Handler is engaged in m generator marketing to bu	arketing of off-spec. ner(e.g., marketing t	used oil fuel other than o UO refinery).
2. ·	Used Oil Burne X	Indication of Activity.		
	Burner Types: Util H=	ity Boiler Indus Hazardous Waste Fuel	trial Boiler	Industrial Furnace B=Both
3.	Used Oil Trans	rporter: Fransporter F=Transfer	r B=Both	
4.	Used Oil Proce	ssor/Re-refiner:	Only B=Roth	u .

' Updated May-95

1) not a transporter

ers per inch) in the unshaded areas only waste codes

Foun Approved. CMB No. 2050-0028. Expires 9-30-92 GSA NO. 0248-EPA-OT

Notification of Regulated Waste

Date Received (For Official Use Only)

of the Resource Conservation Activity and Recovery Act). United States Environmental Protection Agency 1. Installation's EPA ID Number (Mark 'X' in the appropriate box) Miles Bright Bright Company A. First Notification B. Subsequent Notification C. Installation's EPA ID Number (complete Item C) 3 II. Name of installation (include company and specific site name) C III. Location of Installation (Physical address not P.O. Box or Route Number 2 0 Street (continued) ol R City or Town State ZIP Code County Code County Name IV. Installation Mailing Address (See Instructions) Street or P.O. Box City or Town State ZIP Code V. Installation Contact (Person to be contacted regarding waste activities at site) Name (last) (first) 0 CK R 0 L S R Job Title Phone Number (area code and number) N VI. Installation Contact Address (See Instructions) A. Contact Address B. Street or P.O. Box a m City or Town State ZIP Code VII. Ownership (See instructions) Santa Day A. Name of Installation's Legal Owner GENERAL STATE SECTION U M C Street, P.O. Box, or Route Number 0 E City or Town State ZIP Code V 3 5 4 Phone Number (area code and number) B. Land Type C. Owner Type D. Change of Owner (Date Changod) Indicator Month 8 Day P No X P

. Type of Regulated Waste Activity (Mark 'X' In the appropriate box	B. Used	Oil Fuel Activities
A Hazardous	VVasia Action	and the second	Jensting Used Oil Fuel
Generator (See Instructions)	3. Treater, Storer, Dispo installation) Note: A p	Birnit is required	a. Generator Marketing to Burner
Craster than 1000kg/mo (2,200	Jor this mounty sees.		n Other Marketer
The 100 to 1000 kg/mg (220 - 2,200 kg	A Hazardous Waste Co Generator Market	Ing to Burner	o. Burner - Indicate dévice(s) Type of Combustion Device
C. Less than 100 kg/mo (220 lbs.) Transporter (Indicate Mode in boxes	- Batow - Chor Marketers	in a contract of the contract	1. Utility Boiler
2 Transporter (Indicate Mode 1)		ustrial Furnace	2. Industrial Boller
b. For commercial purposes	1 Smeller D	antity Exemption	3. Industrial Furnace
Mode of Transportation	Indicate Type of	Combustion	on Suol Mad
Tr Air	Device(6)		Specification Used Oil Fuel Man (or On-site Burner) Who First
2. Ral 3. Highway	1 Unity Bo	l Boiler	Claims the Oil Meets the Specification
4 Waler	3 Industrie	(Furnace	
S. Other - specify	5 Underground Injer	tion Control	
			Apparent VIII de la Cara
IX: Description of Regulated Wastes	illse additional sheets if nece	ssary)	-isses of poplisted hazardous
IX Description of Regulated Wastes A. Characteristics of Nonlisted Hazardo wastes your installation handles. (See	Wastes. Mark 'X' in the boxes o	orresponding to the charact	ensucs of normana
 A. Characteristics of Nonlisted Hazardo wastes your installation handles. (See 	40 CFR Parts 261.20 - 261.24)		
Masins los	4. Toxicity Characteristic	dous waste numboda) to the Toxoct	y characteristic contaminant(s)).
1. Ignitable 2. Corrosive 3. Reactive (D001) (D002)	(OOOO) (Ust epocific EPA hazar		
	X D 0 0	8 0 0 3 3 5	
B. Usted Hazardous Wastes. (See 40 t	CER 261 31 - 33. See instructions if	you need to list more than 1	2 waste codes.)
B. Usted Hazardous Wastes. (See 40		4	5
1 2			
		10	11 12 12
8	9		
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		sumber. See instructions.	
C. Other Wastes, (State or other waste	s requiring a handler to have an I.D.	Number: See	5 6
2	3	4-1-1-1	
X. Certification: I certify under penalty of law that the system design of the system design.		and and an	der my direction or supervis
to allow under penalty of law that	this document and all attachn	nersonnel properly gat	her and evaluate the inform
accordance with a system desi submitted, Based on my inquiry gathering the information, the complete, I am aware that there is	nformation submitted is, to the resignificant penalties for subr	nitting false information,	including the possibility of the
Imprisonment for knowing violati	lons.	As a series and a series and a series of the	Date Signed
TA Z	Name and Official Title		October 4, 199
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Jan Work Sn	2000年1月1日 - 1000年1月1日 - 1000年1月 - 1		A STATE OF THE PARTY OF THE PAR
XI. Comments			

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RCRIS: Notification View Screen 2 of 6
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*EPA ID: VAD023831316
                Other ID:
                                   Merge Send: Y
*Date Received(MMDDYY): 081880 Source(N/E/S): N Non-Notifier Flag:
*Date Acknowledged (MMDDYYYY): 04291992 Send Acknowledgement:
*Name of Installation: BOCK DRUM CO INC
              Installation Location Address
       2610 FLORIDA AVE
*Streets:
      NORFOLK
*City:
                          State: VA
                                  Zip:
*County Code: 710
              County Name: NORFOLK
              Installation Mailing Address
*Streets:
       2610 FLORIDA AVE
*City:
       NORFOLK
                          State: VA
                                  Zip:
                                       23513
                Contact Information
                                    Phone Address (M, L, O) *
  Last Name
            First Name
                           Title
* BOCK
            RONALD
                       PRES
                                  8048550549
*Streets: 2610 FLORIDA AVE
*City:
       NORFOLK
                          State: VA
                                  Zip:
                                       23513
*Land Type: P
* Enter-Continue
                 F1-Previous Screen
                                F3-Exit
***********************
 RCRIS: Notification View Screen 3 of 6
EPA ID:
       VAD023831316
                  Other ID: ., .,
                                   Source: N
 Owner Sequence Number:
 Ownership: BOCK DRUM CO INC
                                    Type of Owner:
               Address of Owner/Operator
    Street: 2610 FLORIDA AVE
    City: NORFOLK
                          State: VA Zip Code
                                         23513
    Phone: 8048550549
 Current/Previous Indicator: CO Change Date(MMDDYY):
* Enter-Continue
            F1-Previous Screen
                          F3-Exit
                                      F5-Curr. Owner
F6-Prev. Owner
              F8-Help
                          F9-First
                                      F10-Next
 ******
RCRIS: Notification View Screen 4A of 6
********
                 Other ID:
EPA ID: VAD023831316
                                 Source: N
                     RCRA Reg
                           RCRA Reg State Reg
                                          State Reg
Waste Activity
                 Type
                      Status
* HW Generator:
                       R
* HW TSD:
 HW Transporter:
                 X
                       R
                   Rail:
  Transport Mode: Air:
                           Highway: X
                                    Water:
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and the contract of the contra

Other: HW Burner/Blender: NHW Used Oil Recycler: Underground Injection Control: Recycler: * Enter-Continue F1-Previous Screen F3-Exit ************************** RCRIS: Notification View Screen 5 of 6 ************************** EPA ID: VAD023831316 Other ID: Source: Hazardous Waste Codes: Specific/Non-Specific/Commercial/Chemical D000 D001 D002 D003 D008 D039 F017 U001 U002 **U003** U004 U005 U006 U007 UÓ08 · U009 U010 U011 U012 U013 U0:14 U015 U016 U017 U018 U019 U020 U021 U022 U023 U026 U025 U024 **U027** U028 U029 U030 U031 U032 U033 U034 U035 U036 **U037 U038** U039 U040 U041 U042 **U043** ******* *Enter-Continue F1-Previous Screen F3-Exit *F8-Help F9-First F10-Next

Please print or type with ELITE type (12 characters per inch) in the unshaded areas only

Please refer to the Instructions for Filing Notification before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).



Date Received (For Official Use Only)

APR 27 1992

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Form Approved. OMB No. 2050-0028. Expires 10-31-91 GSA No. 0246-EPA-OT

		ID - For Official Use Only
VIII. Type of Regulated Waste Activity	(Mark 'X' in the appropriate boxes.	Refer to instructions.)
A. Hazardou	s Waste Activity	B. Used Oil Fuel Activities
1. Generator (See Instructions) a. Greater than 1000kg/mo (2,200 lbs b. 100 to 1000 kg/mo (220 - 2,200 lbs c. Less than 100 kg/mo (220 lbs.) 2. Transporter (Indicate Mode in boxes 1- a. For own waste only b. For commercial purposes Mode of Transportation 1. Air 2. Rail 3. Highway 4. Water 5. Other - specify	s.) 4. Hazardous Waste Fuel a. Generator Marketing to E 5 below) b. Other Marketers c. Burner - indicate device Type of Combustion Dev 1. Utility Boiler 2. Industrial Boiler 3. Industrial Furnace 5. Underground Injection Contri	a. Generator Marketing to Burner b. Other Markerer c. Burner - indicate device(s) - Type of Combustion Device 1. Utility Boiler 2. Industrial Boiler 3. Industrial Furnace
IX. Description of Regulated Wastes (ling to the characteristics of nonlisted hazardous
B. Listed Hazardous Wastes. (See 40 CFR 1 2 7 8 C. Other Wastes. (State or other wastes required) C. Certification I certify under penalty of law that I have and all attached documents, and the obtaining the information, I believe	4. Toxicity Characteristic (D000) X D 0 0 8 D 261.31 - 33. See instructions if you need to 3 4 9 10 uiring an I.D. number. See instructions.) 3 4 ve personally examined and am fan hat based on my inquiry of those that the submitted information is a second control of the set that the submitted information is a second control of the set that the submitted information is a second control of the set that the submitted information is a second control of the second control of th	A hazardous waste number(s) for the Toxicity Characteristic contaminant(s) 0 3 9 11 11 12 11 12 Iniliar with the information submitted in this individuals immediately responsible for true, accurate, and complete. I am aware in, including the possibility of fines and
Signature II Dock	Name and Official Title (type or print) Ronald H. Bock	
COUNTY NOT HOUSE SHALL SHOW IN	The state of the s	2/26/92
(I. Comments		RECEIVED GENERAL STATE SECTION
		MAR 0 3 1992
Note: Mail completed form to the appropriat	te EPA Regional or State Office. (See Sec	ction III of the bookle FRAnd B3 sees)

Please print or type with ELITE type (12 characters per inch) in the unshaded areas only

United States Environmental Protection Agency Washington, DC 20460

Notification of Hazardous Waste Activity

Please refer to the *Instructions for Filing Notification* before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).

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EPA Form 8700-12 (Rev. 11-85) Reverse



OF REGULATED WASTE ACTIVITY (VERIFICATION)

This is to acknowledge that you have filed a Notification of Regulated Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER

VADO23831316
BOCK DRUM CO INC
2610 FLORIDA AVE
NORFOLK, VA 23513
RONALD BOCK PRES

INSTALLATION ADDRESS

2610 FLORIDA AVE NORFOLK , VA 23513

EPA Form 8700-12B (6-90)

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY REGION III 841 Chestnut Building Philadelphia, Pennsylvania 19107

SUBJECT: RCRA Inspection

DATE: 8/23/88

Facility: Bock Drum Co. ID #: VAD 023 83/316

FROM:

Charlene C. Harrison, Environmental Engineer RCRA Enforcement General Section (3HW15)

TO:

THRU:

FILE

ppt 9/13/88 Victoria P. Binetti, Chief

RCRA Enforcement General Section (3HW15)

THE STATE IS TAKING ACTION TO RESOLVE THE VIOLATIONS IN THIS INSPECTION REPORT.

WE WILL MONITOR THE STATE ACTIVITY REGARDING RESOLUTION OF THESE VIOLATIONS.

- State requesting meeting to address the



COMMONWEALTH of VIRGINIA

DEPARTMENT OF WASTE MANAGEMENT 11th Floor, Monroe Building 101 N. 14th Street Richmond, VA 23219 (804) 225-2667

JUN 1 0 1988

CERTIFIED - RETURN RECEIPT REQUESTED

John Runyan Bock Drum Company 2610 Florida Avenue Norfolk, VA 23513

Re: EPA ID# VAD023831316

Dear Mr. Runyan:

During a recent (May 27, 1988) inspection it was noted that your facility was not in total compliance with the Virginia Hazardous Waste Management Regulations (VHWMR). Such items are indicated by checkmarks on the enclosed inspection checklists and are listed below:

- 1. No hazardous waste has been shipped off-site since June, 1986. Therefore, you are storing hazardous waste illegally without a permit in violation of VHWMR Section 6.4.E.1.
- 2. The date that accumulation begins is not clearly marked and visible for inspection on each container in violation of VHWMR Section 6.4.E.l.b.
- 3. Each container is not clearly marked with the words "Hazardous Waste" in violation of VHWMR Section 6.4.E.l.c.
- 4. The generator has not notified the Executive Director of the Department of the exact location of all hazardous waste accumulation areas in violation of VHWMR Section 6.4.E.l.e.
- 5. The generator does not inspect hazardous waste storage areas at least once each week, and does not record the results of these inspections in an inspection log in violation of VHWMR Sections 9.8.E, 9.1.F.4 and 6.4.E.1.d.
- 6. The generator does not maintain a record of job titles for personnel that are involved with hazardous waste management, a written position description for each job title involved with hazardous waste management, and a list of the names of each employee filling each position in violation of VHWMR Sections 9.1.G.4.a and b.

John Runyan Page 2

- 7. The generator does not have records to document the type and amount of introductory and continuing training for those employees involved in hazardous waste management in violation of VHWMR Section 9.1.G.4.d.
- 8. The facility does not have an internal communications or alarm system capable of providing immediate emergency instructions to facility personnel if the hazardous waste storage area is threatened by fire or explosion in violation of VHWMR Section 9.2.B.1.
- 9. The facility does not have adequate aisle space to allow the unobstructed movement of personnel and equipment during emergencies in violation of VHWMR Section 9.2.E.
- 10. The generator does not have an established contingency plan to deal with any unplanned sudden or non-sudden releases of hazardous waste or hazardous waste constituents to the air, soil, ground water or surface water in violation of VHWMR Section 6.4.E.l.d and 9.3.B.
- 11. Many containers in the hazardous waste container storage area were stored unclosed and others showed signs of leaking and corrosion in violation of VHWMR Section 9.8.B.

Due to the nature and extent of the above violations, we would like to hold a meeting here on June 29, 1988 at 11:00 a.m. to discuss possible enforcement action. A map has been enclosed for your convenience.

If you have any questions regarding this matter, please contact me at (804) 225-2780 or Ed Lanford at (804) 225-2892.

Sincerely,

Lov Lisa A. Clark

Public Health Engineer

Division of Technical Services

Motion most R. Walth

Enclosures

cc: S. Morse

E. Lanford

J. Ely

P. Ewald

LAC:365/1hc

SURVEY SHEET FOR INSPECTION OF HAZARDOUS WASTE FACILITIES

	11ity: 30ck Drum Co.	
Address:	2610 Florida Avenue	
	Norfolk, VA Z	3513
EFA ID Numbe	r: VAD.023831316	
Facility Rep	resentative: John Runyar	1
Title: Par	rt-Owner	
	mber: (804) 855-0549	
	Name: Lisa Clark	
	du Health Enginee	
	ection: May 27, 1988.	-
	the business activity of the findating, recycling, etc.)	rm? (i.e., furnitur
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2. Give a hazardous was i. Dust from 52. Caustic Siu 3. Paint from 4. Caustic Siu 3. List the basis (use the accumulated a Waste Code 1.	brief description of the ste code(s). Steel Snop Blaster * udge from Cleaning Caustic Tanks (Water Wash Spray Booth (No metals in a Drym Oily/Water Residue. * Sjudge amounts of hazardous waste properties to the site. Amount Generated 6 dryms/mo	waste stream(s) and No metals) 97% Na OH npaint) * enerated on a monthly the greatest amount Amount Accumulated 7 drums

4.	Does the facility ever generate greater than: -1 kg. of acutely toxic waste (P listed waste or F020-F023 and F026-F027)?	YES	(0)
	-100 kg of clean up from a spill of P listed waste or F020-F023 and F026-F027 waste?	YES	(ZD)
Ιf	yes, then the facility is a generator.		
5.	Does the facility generate land banned waste?	YES	ND
	If yes, circle the type:		
	F001 F002 F003 F004 F005		
	California List - list the metal		
	Cyanide		•
	Dioxin		
	How is the waste presently being handled? Where is Is the generator providing the required certific the TSD facility?	it s atior	erit'
	Is the generator providing the required certific the TSD facility? Up until 87 RTS was transporting waste to No waste shipped in 87 or 88.	it s atior	erit?
	Is the penerator providing the required certific the TSD facility? Up until 87 RTS was transporting waste to	it s	ent:
⊇ X C	Is the generator providing the required certific the TSD facility? Up until 87 RTS was transporting waste to No waste shipped in 87 or 88.	ation	is to
⊇ X C	Is the generator providing the required certific the TSD facility? Up until 87 RTS was transporting waste to No waste shipped in 87 or 88. GSX presently testing Samples. Does the facility generate any hazardous waste cluded from regulation? If yes, list the waste and	ation	is to
2 % 0	Is the generator providing the required certific the TSD facility? Up until 87 RTS was transporting waste to No waste shipped in 87 or 88. GSX presently testing Samples. Does the facility generate any hazardous waste cluded from regulation? If yes, list the waste and	ation	is to
	Is the generator providing the required certific the TSD facility? Up until 87 RTS was transporting waste to No waste shipped in 87 or 88. GSX presently testing Samples. Does the facility generate any hazardous waste cluded from regulation? If yes, list the waste and	ation	is to
exc for	Is the generator providing the required certific the TSD facility? Up until 87 RTS was transporting waste to No waste shipped in 87 or 88. GSX presently testing Samples. Does the facility generate any hazardous waste cluded from regulation? If yes, list the waste and exclusion. No	ation	is to

Need to get copy of all test results.

If the times are exceeded, then the facility is moved up to the next category. A generator becomes a TSD facility.

A conditionally exempt small quantity penerator can accumulate indefinitely, but if the amount accumulated ever exceeds 1000 kgs. then he becomes a small quantity penerator. At the time the 1000 kg. limit is passed, the accumulation times for small quantity penerators begins.

Small quantity generators can accumulate up to 180 days or 270 days if the disposal site is over 200 miles away. However, if at any time over 6000 kgs. of waste is generator.

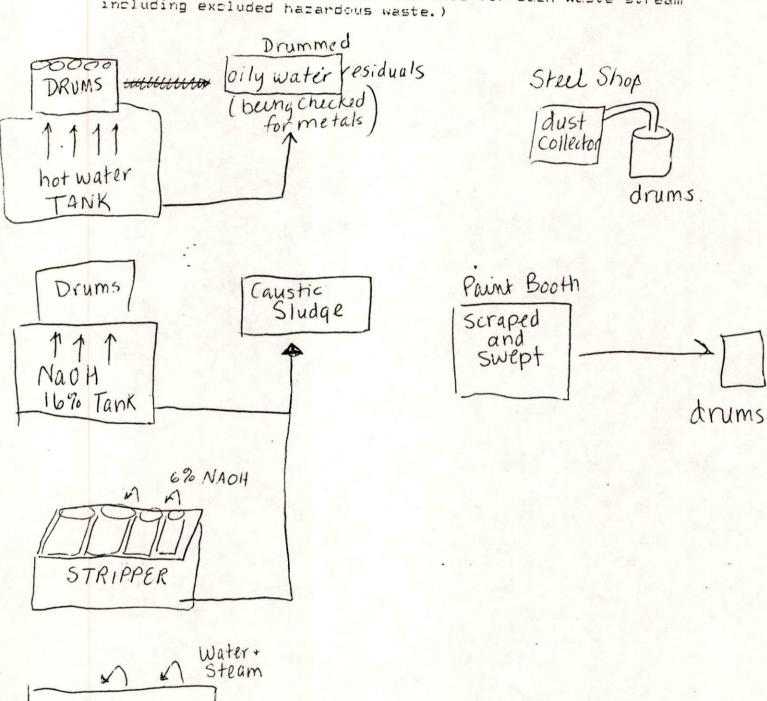
9. List each container and tank accumulation area. Specify the number and capacity of each tank. [Note: Include any satellite accumulation areas. Verify that only 55 pallons of waste (or one quart of acutely toxic waste) is at that site.]

Strage Ayea	83	Number of Tanks	Capacit
			55-9
D. Comments			. ———
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11. Waste Management Flow Diagram

RINSER

(On this page sketch a brief flow diagram that includes where the waste is generated, the steps through a treatment system (if any), the steps through storage including satellite accumulation areas. Do this for each waste stream including excluded hazardous waste.)



CHECKLIST FOR HAZARDOUS WASTE INSPECTION OF GENERATORS

	Name of Facility: Bock Drum
	Address: 2610 FIGURA Arenue
	Norlock, VA 23513
	EFA ID Number: VAD023831-316
	Facility Representative: John Rumyan
	Title: Carl-Owner
	Telephone Number (804) 855-0549
	Inspector's Name: LISA Clark
	Title: Public Health Engineer
	Date of Inspection: MW27, 1988 .
Va. Waste	Hazardous Generator Checklist Reg.
€. 3.	1. Is a manifest system currently being (YES) NO used for all hazardous waste shipped off site? Howeva, no waste shipped off.
6.2.C	2. Has the penerator determined that the YES NO transporter(s) and facility have an EPA ID number? [Note: Shipments to POTWs must be manifested.]
5. 5. A	.7 3. Has the generator determined that the (ES) NO transporter has a valid Virginia Transporter Permit?
6.3 5.3.8	4. Is the following information on the manifest:
	a. The generator's name, mailing YES NO address, EPA ID Number, and telephone number?
5. 3. B	b. An unique five digit number YEB NO assigned to this manifest by the generator?

- .3. B.3.
- 3.E.4.
- 3.B.5.
- ,3.B.E.

- .3.E.7.
- B.C.

c. The total number of pages of the (YES) manifest?



The company name and EPA ID number of transporter used?

The company name, site address, and EPA ID number of the facility designated to receive the waste?



The .U. S. DOT description of each waste to include its proper shipping .name, hazard class, and I.D. number (UN/NA) as identified in the Virginia Regulations Governing the Transportation of Hazardous Material?



g. The quantities of waste being shipped?

NO

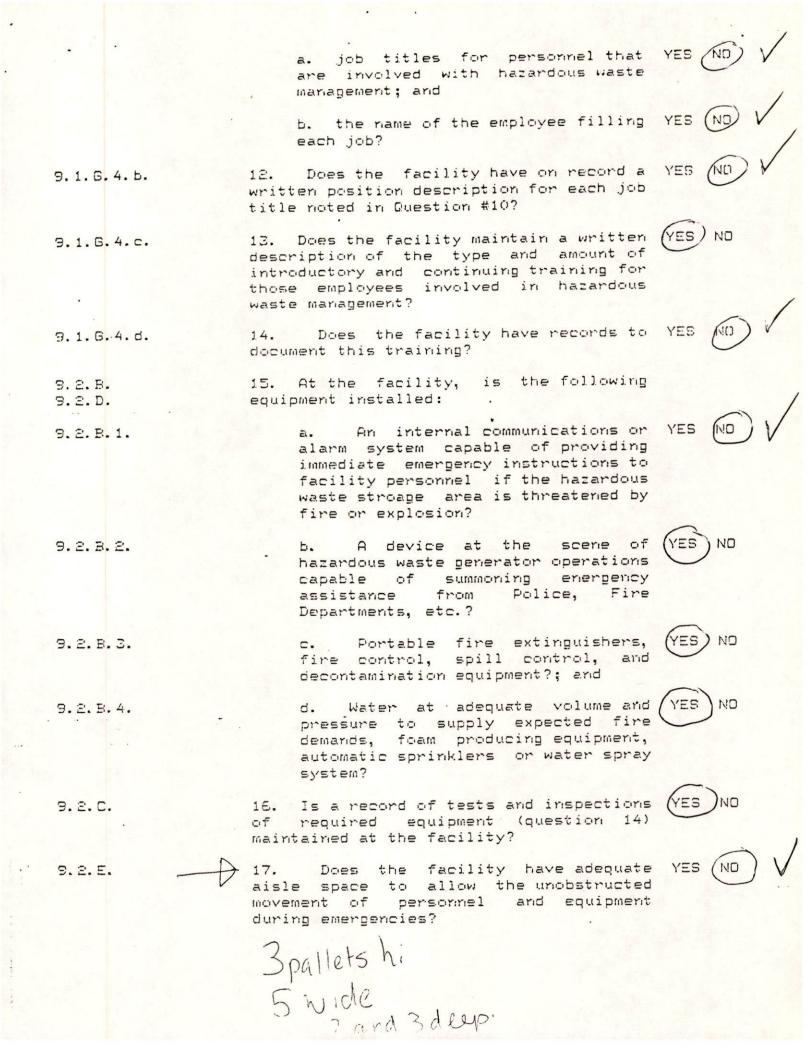
h. The following certification: "I hereby declare that the contents of this consignent are 'fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition by (mode for transport to according transportation) international applicable national povernmental regulations. I certify that I have a program in place to reduce the volume and toxicity of waste generated to a degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat 'to human health environment."

5. Have manifest been received from the TSD facility for any waste which was shipped over 45 days ago?

generator filed has the If no, exception report with the Executive Director which included:

.5.C.2.

6.5.C. 2. a.	a. A legible copy of the manifest YES NO \mathcal{N}/A for which the generator does not have confirmation of the delivery?
6.5.C.2.b.	b. A cover letter explaining the YES NO N/A efforts taken to locate the shipment?
6.4.E.1.	6. Is hazardous waste being accumulated YES NO Von-site for less than 90 days? If yes,
6.4.E.1.a.	a. Is the waste stored in YES NO Containers or tanks? (If yes, fill out appropriate checklists. If no, a TSD permit is required.)
6.4.E.1.b.	b. Is the date that accumulation YES NO V begins clearly marked and visible for inspection on each container?
6.4.E.1.c.	c. Is each container and tank YES (NO) V clearly marked with the words "Hazardous Waste"?
6.4.E.1.e.	d. Has the generator notified the YES ND Executive Director by March 1, 1988, of the exact location of the accumulation areas?
6.4.E.1.d. 9.1.F.4.	7. Does the generator record inspections YES NO V in an inspection log?
6.4.E. 1.d. 9.1.G. 1.	8. Have facility personnel successfully (YES) NO completed a program of classroom training or on-the-job training in hazardous waste management procedures?
9.1.G. 2.	9. Have new employees to the facility (YES) ND successfully completed training mentioned above within 8 months of their employment or assignment to the facility?
9.1.6.3.	10. Do personnel participate in an YES NO annual review of the initial training?
9.1.6.4.a.	11. Does the facility maintain a record of:



	•	
	• •	•
6.4.E.1.d. 9.3.	18. Does the facility have an established contingency plan to deal with any umplanned sudden or non-sudden release of hazardous waste or hazardous waste constituents to the air, soil, ground water or surface water?	YES NO
9.3.B.	19. Does the contingency plan contain the following elements:	
9.3.B. (1,2).	a. A detailed description of emergency procedures facility personnel will implement in response to fires, explosions, or unplanned releases of hazardous waste to air, soil, and water?	YES (NO).
9.3.B. 4.	b. A listing of names, addresses, and phone numbers of the generator facility emergency response coordinators? List primary Coordinator.	YES (NO)
	Title	
9.3.B.5.	c. A list of appropriate emergency equipment necessary to cope with emergencies at the generator facility?	YES (ND)
9.3.B.E.	d. Does this list specify the location and physical description of each item on the list and a brief description of each item on the list, and a brief outline of its capabilities?	YES (NO)
9.3.B.E.	e. An evacuation plan for the generator facility where there is a possibility that evacuation could be necessary?	YES (NO)

	· · ·			
9.3.C.	f. Have copies of the contingency plan been sent to all local police departments, fire departments, hospitals and Commonwealth and local emergency response teams? List:	YES	ND	
	<u>. </u>			
9, 3. C.	g. Is there documentation to indicate the personnel listed above received the contingency plan?	YES	(20)	
9.3.F. (9,10).	h. If the contingency plan has been implemented, was a written report filed with the Executive Director and were the Executive Director and other required authorities properly notified before operations resumed?	YES	NO	N/A
6.4.E.4.a.	20. Does the generator have satellite accumulation areas? If yes,	YE5(ND)
	a. Is the area located at or near the point of hazardous waste generation?	YES	NO	N/A
6.4.E. 4.a. (1) 9.8.B.	b. Are the containers in good condition?	YES	NO	N/A
5.4.E.4.a.(1) 9.8.C.	c. Are the containers compatible with the waste?	YES	NO	NA
6.4.E.4.a.(1) 9.8.D. 1.	d. Are the containers kept closed?	YES	ND	N/A
6.4.E. 4.a. (2)	e. Are the containers marked with the words "Hazardous Weste" or other words that identify the contents of the container?	YES	NO	NIA
6.5.E.4.b.	f. Are amounts in excess of those allowed being accumulated in the satellite accumulation area? If yes,	YES	NO	NIX
	(1) Has the generator marked the amount in excess with the date the excess amount began accumulating?	YES	NO	Nla

the generator either removed the excess within three days of the date of excess accumulations or has he complied with all Provisions for accumulation areas listed in question 5 on this checklist? Namely, has he notified the Executive Director about the location of the accumulation area?

What has the generator chosen to do?_____

6.5.A

21. Does the generator retain copies of all manifests, annual reports, and test results for at least three years?

YES N

6.5.B.

. 22. Has the facility submitted an annual report for the preceding calendar year?

YES

NΟ

If drams aren't empty, they return them to the customer.

INSPECTION CHECKLIST FOR THE USE AND MANAGEMENT OF CONTAINERS

	Name of Facility: Bock DRUMS
	Address: 2610 Florida Avenue
	Norfolk, VA 23513
	EPA ID Number: VAD 02383/3/6
k.	Facility Inspection Representative: Tho Rungua
	Title: - tart-Owner
	Telephone Number: (804) 855-0549
	Inspector's Name: L/Sa C/ark
	Title: Public Health Engineer
]	Date of Inspection: May 27, 1988
Va. Waste	Hazardous Reg.
9. 8. B. -	1. Are all containers in good YES (D) V condition, i.e., not showing signs of leakage or corrosion or any other deterioration/deformation?
	If not, list the storage/accumulation areas where there are problems and the type of problem.
	Dutback Rusted away
	<u>Carred Coroded open</u> .
3. e. c.	2. Are the containers lined or made of YES NO materials compatible with hazardous waste placed into them so that the container will not react or otherwise be incompatible with (corrode, etc.) the hazardous wastes?

	^ ·
	Are all containers holding hazaroous YES (NO) te kept closed during storage?
	not, list the locations where open tainers are found
	Storage trea
	Are areas where hazardous waste YES (10) tainers are stored inspected by the en/operator at least once each week?
9.1.F.2.a. 5. 9.1.F.4. 6.4.E.1.d.	Is an inspection log maintained? YES NO
rea	Are containers holding ignitable or YES NO V/A ctive waste located at least 50 ft. Make the facility's property line?
	Are incompatible wastes placed in YES NO ${ m N/A}$ arate containers?
haz wit con imp	Are storage containers holding YES NO Ardous wastes which are incompatible NA HARD MATERIALS STORED IN tainers, tanks, piles, or surface oundments separated by dikes, berms, ls, or other devices?
5.4.E.4.a. 9.	For satellite accumulation areas:
	a. Are there more than 55 gallors YES NO N /A of any one type of waste present in the area? Yes,
5.4.E.4.b	b. Have the drums been in the YES NO satellite accumulation area longer than 2 days? y=s,
5.4. E. 4. 5.	c. Has the company notified the YES NO Department about the location of the storage area?
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VI.	Typ	е о	f Re	gula	ated	Wa	ste	Acti	vity	(Ma	ark '.	X' in	the	арр	rop	riate	e box	res.	Ref	er to	ins	truc	tion.	s.)					
X	A. Hazardous Waste Activity A. Hazardous Waste Activity B. Used Oil Fuel Activities 1 a. Generator 2 Transporter 3 Treater/Storer/Disposer 4. Underground Injection 5. Market or Burn Hazardous Waste Fuel (enter 'X' and mark appropriate boxes below) (enter 'X' and mark appropriate boxes below) a. Generator Marketing to Burner c. Burner 7. Specification Used Oil Fuel Marketer (or On site Burner) Who First Claims the Oil Meets the Specification																												
			. Bur	ner				*:		PAL WA	MAGEN	MENT	1	1				a Thirt											
VII.	h ha	zard	Fue ous w	aste	Tuei	or on	r-spec	cirica	tion	bus	tion of to	iet is	burn	ed. S	ee ın	struc	appro	for a	te bo. lefini	xes to	of co	ombu	stion	devid	ces.)	tion d	levice	(s) in	
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IX.	Firs	t or	Sul	sec									N- I				Sept.	217	ton, el									E FE	
Mar	k 'X'	in th	ESCUR USON	propi	riate	box t	o ind	icate	whe	ether	this	is you	ur in	stalla	tion'	s firs	st not	ificat	ion o	of ha	zardo	ous w	aste	activ	ity or	r a su	ubseq	uent	
			Notific									(con							ора					EPA	ID N	umbe	er		

	-		— For Official Use On	T I I I
		C W		T/A
Description of Hazardous Waste			THE RESERVE	
Hazardous Wastes from Nonspecific Sou	rces. Enter the four-digit nur	mber from 40 CFR Part	261.31 for each listed h	lazardous waste
rom nonspecific sources your installation l	nandles. Use additional shee	ts if necessary.		
1 2	3	4	5	6
RECEIVEN				
7				
1 1201	9	10	11	12
SO FI YAM				
lazardous Wastes from Specific Sources	. Enter the four-digit number	r from 40 CFR Part 261.	32 for each listed hazar	rdous waste from
specific sources your installation handles.	Use additional sheets if nece	essary.		
13	15	16	17	18
19 20	21	22	23	24
25 26	27	28	29	30
Commercial Chemical Product Hazardous	wastes. Enter the four-dig	it number from 40 CFR	Part 261.33 for each ch	emical substance
our installation handles which may be a h	azardous waste. Use addition	nal sheets if necessary.		
31 32	33	34	35	36
				100
37 38				
37 38	39	40	41	42
43 44	45	46	47	48
isted Infectious Wastes. Enter the four-d		. 261 24 (
pitals, or medical and research laboratories	your installation handles. U	se additional sheets if r	necessary.	lais, veterinary nos-
49 50	51	52	53	54
Characteristics of Nonlisted Hazardous Wour installation handles. (See 40 CFR Parts	astes. Mark 'X' in the boxes s 261.21 — 261.24)	corresponding to the ch	naracteristics of nonliste	ed hazardous wastes
☐ 1. Ignitable	2. Corrosive	☐ 3. Reacti		4. Toxic
(D001)	(D002)	(D003)		(D000)
Certification				
I certify under penalty of law that	I have personally exam	ined and am famili	ar with the informa	ation submitted in
this and all attached documents,	and that based on my i	nquiry of those ind	ividuals immediate	ly responsible for
obtaining the information, I believe there are significant penalties for s	that the submitted info	ormation is true, acc ation, including the	curate, and complet possibility of fine a	e. I am aware tha nd imprisonment
nature	The state of the s	cial Title (type or print)		te Signed
77 5 /			2	o Signed
Emminut Donas	John E. R	UNUAN IF U	ice Tres M	1Ay 6, 1986
Form 8700-12 (Rev. 11 85) Reverse		1		1



EPA Form 8700-12B (4-80)

ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY (VERIFICATION)

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER	BOCK DRUH CO INC 2610 FLORIDA AVE NORFOLK	VA	23513
INSTALLATION ADDRESS	2610 FLORIDA AVE NORFOLK	VA	23513

10/23/80

CONTINUE ON REVERSE

EPA Form 8700-12 (6-80)

L	SEITA	NOTIFICAT	ION OF HAZAR	DOUS WASTE	ACTIVITY		S: If you receive	
	INSTALLA- TION'S EPA		*			information on	n the space at le the label is inco	rrect, draw a line
	I.D. NO.	VAD02383	1316			in the appropr	I supply the corriate section below	w. If the label is
	I. STALLATION					below blank, It	correct, leave Item you did not rec	eive a preprinted
	INSTALLA-	BOCK DRUM	RIDA AVE				e all items, "Insta ere hazardous wa	
	II. MAILING ADDRESS	MORFOLK,					and/or disposed pal place of busin	
						to the INSTRU	JCTIONS FOR Fore completing	ILING NOTIFI-
I	LOCATION IL OF INSTAL- LATION	2610 FLO MORFOLK,				information re-	quested herein is of the Resource	required by law
	LATION	LITTLE FIFTEE	VII sin by but & but			Recovery Act).	or the negotice t	Joniservation and
CHA	OR OFFICIAL U	SE ONLY		计 图 图 图 图 图 图	A	RECEN	igh.	
DETACH				OMMENTS		RCRA SE	CTION	
4	5 16					EPA REGIO	III M	55
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I	7 V ADD 0 2 3	1831131	031	80081	8			
	. NAME OF INST	ALLATION					E CANA	ESCHILLE I
1	BOCK DR	SIMM GO	IINC					
	I. INSTALLATIO	N MAILING AD	DRESS				67	
			STREET OR P.O. BOX					
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I	II. LOCATION OF	SHOW THE RESIDENCE OF THE	- AND THE RESIDENCE					
		STRE	ET OR ROUTE NUMBI	ER	BEHAR			
	5 16					45		
1		CITY	OR TOWN	THE WITTEN	ST. ZIP	CODE		
	5 16				40 41 42 47	- 51		
1	V. INSTALLATIO	AND DESCRIPTION OF THE PERSON NAMED IN	ND TITLE (last, first, &	ioh title)		PHONE	IO. (area code & n	
-	BOOKE	DONOLD	DOESIA	ENT		2011	25505	11 9
1	OWNERSHIP	MUMAILID	TIMEBILD			45 46 - 48	49 - 51 52	- 55
4	- Commence of the commence of		A. NAME OF INSTA	LLATION'S LEGAL	L OWNER			
DETACH		RUM C	OMPANY	INC				
DET	B. TYPE OF OV enter the appropriate	WNERSHIP e letter into box)	VI. TYPE OF HAZ.	ARDOUS WASTE	ACTIVITY (er	nter "X" in the	appropriate bo	55 (x(es))
4	F = FEDERAL	0.0	A. GENER	NOITA	⊠в. 1		ION (complete ite	- Annual Market Color
	M = NON-FEDE	RAL M	C. TREAT	STORE/DISPOSE	D. 1	UNDERGROUN	DINJECTION	
N	II. MODE OF TR	ANSPORTATIO	N (transporters only	- enter "X" in th	ne appropriate l	box(es))		A HAYARAN
	A. AIR	B. RAIL	C. HIGHWAY	D. WATER	E. OTHER	R (specify):		
	III. FIRST OR SU							
III	this is not your first	notification, enter	cate whether this is your your Installation's EPA	I.D. Number in the	otification of haz space provided b	ardous waste act elow.	ivity or a subsequ	ent notification.
						C. 1	NSTALLATION'S	S EPA I.D. NO.
	A. FIRST N	OTIFICATION	B. SUBSEQU	ENT NOTIFICATIO	N (complete iten	n C)		
Ī	X. DESCRIPTION	OF HAZARDO	US WASTES	D. WOLLSON				
P	lease go to the reverse	e of this form and	provide the requested in	formation.	建			

IX. DESCRIPTION OF	HAZARDOUS WAST	ES (continued from	front)		
A. HAZARDOUS WASTES waste from non-specific				40 CFR Part 261.31 fo	r each listed hazardous
1	2	3	4	5	6
FALL					
F U I 1	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
7	8	9	10	11	12
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
B. HAZARDOUS WASTES specific industrial sources				R Part 261.32 for each	listed hazardous waste from
13	14	15	16	17	18
	TO BE SEE				
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
19	20	21	22	23	24
was and a factor	3 3 3 3 3 30		10 Em 17 Em		建设设置
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
25	26	27	28	29	30
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
c. COMMERCIAL CHEMIC stance your installation h					3 for each chemical sub-
31	32	33	34	35	36
UNION	11000	11003	11004	11005	11006
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
37	38	39	40	41	42
111010171	UNDIS	120011	1110/10	Molli	1110112
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
43	44	45	46	47	48
110113	100114	WOL5	110116	10017	1001181 *
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
D. LISTED INFECTIOUS W hospitals, medical and res					from hospitals, veterinary
49	50	51	52	53	54
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
E. CHARACTERISTICS OF hazardous wastes your ins	NON-LISTED HAZAI stallation handles. (See	RDOUS WASTES. Mark 40 CFR Parts 261.21 —	"X" in the boxes corre	sponding to the characte	eristics of non-listed
1. IGNITAE		2. CORROSIVE	∑3. REAC (D003)	TIVE	⊠ 4. TOXIC (D000)
X. CERTIFICATION					
I certify under penalty attached documents, ar I believe that the subm mitting false informatio	nd that based on my itted information is	inquiry of those ind true, accurate, and c	lividuals immediately omplete. I am aware	responsible for obta	ining the information,
SIGNATURE		NAME & OFF	ICIAL TITLE (type or p	print)	DATE SIGNED
Jun. 0 1	10		d H. Bock		8/15/80

President

EPA Form 8700-12 (6-80) REVERSE

- 1. Addition attached
 - 2. Addition attached

		FOR OF						
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IX. DESCRIPTION OF HAZARDOUS WAS	STES (continued from front)
A. HAZARDOUS WASTES FROM NON—SPECIF waste from non—specific sources your installation.	FIC SOURCES. Enter the four—digit number from 40 CFR Part 261.31 for each listed hazardous ion handles. Use additional sheets if necessary.
1 2	3 4 5 6
23 - 26	23 - 26 23 - 26 23 - 26
7 8	9 10 11 12
P HAZARDOLIS WASTES EDOM SPECIFIC COL	23 - 26 23 - 26 23 - 26 23 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 26 120 - 2
specific industrial sources your installation hand	URCES. Enter the four—digit number from 40 CFR Part 261.32 for each listed hazardous waste from dies. Use additional sheets if necessary.
13 14	15 16 17 18
19 20 20	23 - 26 23 - 26 23 - 26
	21 22 23 24
23 - 26	
25 26 26 26	23 - 26 27 28 29 29 30
23 - 26	23 - 26 23 - 26 23 - 26
C. COMMERCIAL CHEMICAL PRODUCT HAZA stance your installation handles which may be a	ARDOUS WASTES. Enter the four—digit number from 40 CFR Part 261.33 for each chemical sub-
31 32	33 34 35 36
10019 U020	0021 0022 0023 0024
23 - 26	$\frac{23}{23} - \frac{26}{23}$
37 38	39 40 41 42
[U 0 2 5] U 4 2 6	
23 - 26	23 - 26 23 - 26 23 - 26
43	45 46 47 48
10031	0101313 0101317 0101315 0101316
D. LISTED INFECTIOUS WASTES. Enter the for	ur-digit number from 40 CFR Part 261.34 for each listed hazardous waste from hospitals, veterinary
nospitais, medical and research laboratories you	ir Installation handles. Use additional sheets if necessary.
49 50	51 52 53 54
E. CHARACTERISTICS OF NON-LISTED HAZA	ARDOUS WASTES. Mark "X" in the boxes corresponding to the characteristics of non-listed
hazardous wastes your installation handles. (See	e 40 CFR Parts 261.21 - 261.24.)
L. IGNITABLE	2. CORROSIVE 3. REACTIVE 4. TOXIC
X. CERTIFICATION	D002) (D003)
	a paragraphy examined and an familiar with the
attached documents, did tidit based on m	e personally examined and am familiar with the information submitted in this and all y inquiry of those individuals immediately responsible for obtaining the information,
I believe that the submitted information is	S ITUE, accurate, and complete I am aware that there are cignificant nanalties for sub-
mitting jaise information, including the pos	ssibility of fine and imprisonment.
SIGNATURE	NAME & OFFICIAL TITLE (type or print) DATE SIGNED
EDA Form 9700.12 (C.90) DEVEDCE	

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IX. DESCRIPT	ION OF HAZ	ARDOUS WAS	TES (continued from fro	int)	Security of the	型CD-14代码(57.00)
A. HAZARDOUS waste from no	S WASTES FRO n—specific sour	M NON—SPECIFI ces your installatio	C SOURCES. Enter the fo in handles. Use additional s	ur—digit number from cheets if necessary.	40 CFR Part 261.31 for	each listed hazardous
1	:	2	3	4	5	6
23	26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
7		8	9	10	11	12
23 -	120	23 - 26	23 - 26	23 - 26	23 - 26	23 - 25
B. HAZARDOUS specific industr	rial sources you	M SPECIFIC SOU r installation hand	RCES. Enter the four—digites. Use additional sheets if	t number from 40 CFF necessary.	Part 261.32 for each li	sted hazardous waste from
12	3	14	15	16	17	18
						,
23 •	126	23 - 26	23 - 26	23 26	23 - 26	23 - 26
19	'	20	21	22	23	24
21 -	25	26	27	28	29 29	30
-1-1	- - 		 	 		
C. COMMERCIA	L CHEMICAL	PRODUCT HAZAS	RDOUS WASTES. Enter th	e four-digit number fr	om 40 CFR Part 261.3	3 for each chemical sub-
stance your in:	stallation handle	es which may be a	hazardous waste. Use addit	ional sheets if necessar	y	•
31		32	33	34	35	36
'וסטו	371	lu d3 8	0 0 3 9 ' '	10040	W01411	U014121
<u> </u>	26	23 26	23 26	23 26	23 - 26	23 - 26
37	<u>, </u>	38	39	40	41	42
U 0 ¹	43	101014141	101014151	101014161	101014171	10101181
23	- 25	23 - 26	23 * 26	23 26	23 - 26	23 20
110	100	44	45 	46	47	48
<u> </u>	414	0050	00001	<u> </u>	<u> </u>	U034
D. LISTED INFE	CTIOUS WAST	ES. Enter the fou	r-digit number from 40 CF	R Part 261 34 for each	listed hazardous waste	from hospitals, voterinary
hospitals, med	lical and researc	h laboratories your	r installation handles. Use a	dditional sheets if nece	ssary.	mont hospitals, votermary
49	<u> </u>	50	51	52	53	54
	1	1111				
23-1	26	23 - 29	23 - 25	25 - 26	23 - 26	23 - 26
E. CHARACTER hazardous was	ISTICS OF NO tes your installa	N—LISTED HAZA Ition handles. <i>(See</i>	ARDOUS WASTES. Mark " 140 CFR Parts 261.21 — 26	X" in the boxes corresponder in the boxes corresponded in the boxes co	conding to the character	ristics of non—listed
[] 100a)	IGNITABLE		☐2. CORROSIVE	[D003]		4. TOXIC
	<u>' </u>					(D000)
X. CERTIFICA						
I certify unde	er penalty of	law that I have	personally examined a y inquiry of those indiv	nd am familiar with	the information sub	mitted in this and all
I believe that	the submitte	d information is	true, accurate, and cor	nplete, I am aware i	that there are signific	cant penalties for sub-
mitting false i	n'formation, i	ncluding the pos.	sibility of fine and impr	isonment.	<i></i>	•
SIGNATURE		· · · · · · · · · · · · · · · · · · ·	NAME & OFFIC	IAL TITLE (type or p	rint)	DATE SIGNED
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EPA Form 8700-12 (6-80) REVERSE

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IX. DESCRIPTION OF HA	ZARDOUS WASTE	S (continued from f	ont)			8
A. HAZARDOUS WASTES FR waste from non—specific sou				10 CFR Part 261.31 for	each listed hozardous	
1	2	3	4	5	6	1
23 - 20	23 - 26	23 - 24	23 - 26	23 - 28	23 - 26	
7		9	10	11	12	ğ
						DETACH
B. HAZARDOUS WASTES FR specific industrial sources yo	OM SPECIFIC SOURC	ES. Enter the four—di Use additional sheets	git number from 40 CFR if necessary.	Part 261.32 for each li	sted hazardous waste from	Ā
13	14	15	16	17	18	1
19	20	21	22 26	23 - 26	23 - 26	
23 - 26	23 - 26	23 26	23 26	23 - 26	23 20	
25	26	27	28	29	30	
23 - 25	23 - 26	23 - 26	23 26	23 26	23 - 26	
C. COMMERCIAL CHEMICAL stance your installation hand	PRODUCT HAZARD lles which may be a ha	OUS WASTES. Enter transcriptions waste. Use add	the four—digit number fr litional sheets if necessar	om 40 CFR Part 261.3 /-	3 for each chemical sub-	
31	32	33	34	35	36	7
0055	U056	U057	U058	0059	UD60 , :	
37	36	39	40	41	42	1
VOGI	U062	णवंदात्र	VO 64	UOGS	01066	
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บอันา	บอ๋ยส	0069	<u> </u>	ורפוט	עוסיים י	
21 26	23 20	23 - 16	23 26	23 2 26	23 24	_[
D. LISTED INFECTIOUS WAS hospitals, medical and research	STES. Enter the four— rch laboratories your in	digit number from 40 (stallation handles. Use	CFR Part 261.34 for each additional sheets if nece	listed hazardous waste ssary.	from hospitals, veterinary	
49	50	51	52	53	54	1
E. CHARACTERISTICS OF N hazardous vastes your instal	ON-LISTED HAZARI	DOUS WASTES. Mark O CFR Parts 261.21 — 2	"X" in the boxes corresp 261,24.)	oonding to the characte	ristics of non-listed	
L IGNITABLE	⊒ 0 0 q)	2. CORROSIVE	☐3. REACT	TIVE	4. TOXIC	
X. CERTIFICATION	de la faction de	AND THE PROPERTY OF THE PARTY O	Same of the same of the			A
I certify under penalty of attached documents, and I believe that the submitt mitting false information,	that based on my i ed information is tr	nquiry of those indi ue, accurate, and co	ividuals immediately i omplete. I am aware i	responsible for obta	ining the information.	ETACHA
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EPA Form 8700-12 (6-80) REVERSE

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A. HAZAROUS WASTES FROM NON-SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from non-specific sources your installation handles. Use additional sheets if necessary. B. HAZAROUS WASTES FROM SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from pecific industrial sources your installation handles. Use additional sheets if necessary. C. COMMERCIAL CHEMICAL PRODUCT HAZAROUS WASTES. Enter the four-digit number from 40 CFR Part 261.32 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary. C. COMMERCIAL CHEMICAL PRODUCT HAZAROUS WASTES. Enter the four-digit number from 40 CFR Part 261.32 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary. C. COMMERCIAL CHEMICAL PRODUCT HAZAROUS WASTES. Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary. C. COMMERCIAL CHEMICAL PRODUCT HAZAROUS WASTES. Enter the four-digit number from 40 CFR Part 261.32 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary. C. COMMERCIAL CHEMICAL PRODUCT HAZAROUS WASTES. Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from hospitals, weterinary hospitals, medical and research laboratories your installation handles. Use additional sheets if necessary. C. COMMERCIAL CHEMICAL CHEMICAL PRODUCT HAZAROUS WASTES. Mark "X" in the boxes corresponding to the characteristics of non-listed hazardous wastes your installation handles. Use additional sheets if necessary. C. COMMERCIAL CHEMICAL CHEMICAL CHEMICAL PRODUCT HAZAROUS WASTES. Mark "X" in the boxes corresponding to the characteristics of non-listed hazardous wastes your installation handles. Use additional theets if necessary. C. COMMERCIAL	IX. DESCRIPT	ION OF HAZ	ARDOUS WA	ASTES (continued from from	nt)			8 J
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IX. DESCRIPTION OF HAZARDOUS WASTES (continued from front)
A. HAZARDOUS WASTES FROM NON—SPECIFIC SOURCES. Enter the four—digit number from 40 CFR Part 261.31 for each listed hazardous waste from non—specific sources your installation handles. Use additional sheets if necessary.
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B. HAZARDOUS WASTES FROM SPECIFIC SOURCES. Enter the four—digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific industrial sources your installation handles. Use additional sheets if necessary.
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E. CHARACTERISTICS OF NON-LISTED HAZARDOUS WASTES. Mark "X" in the boxes corresponding to the characteristics of non-listed hazardous wastes your installation handles. (See 40 CFR Parts 261.21 – 261.24.)
[D001] [D002] [D003] [3. REACTIVE [D000] [4. TOXIC
X. CERTIFICATION
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IX. DESCRIPTION OF HAZARDOUS WASTES (continued from fro	
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B. HAZARDOUS WASTES FROM SPECIFIC SOURCES. Enter the four—dig specific industrial sources your installation handles. Use additional sheets it	t number from 40 CFR Part 261.32 for each listed hazardous waste from necessary.
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E. CHARACTERISTICS OF NON-LISTED HAZARDOUS WASTES. Mark hazardous wastes your installation handles. (See 40 CFR Parts 261.21 2	"X" in the boxes corresponding to the characteristics of non-listed
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X. CERTIFICATION I certify under penalty of law that I have personally examined attached documents, and that based on my inquiry of those indi I believe that the submitted information is true, accurate, and comitting false information, including the possibility of fine and imp	and am familiar with the information submitted in this and all viduals immediately responsible for obtaining the information, mplete. I am aware that there are significant penalties for sub-
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IX. DESCRIPTION OF HAZARDOUS WASTES (Continued from front)
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B. HAZARDOUS WASTES FROM SPECIFIC SOURCES. Enter the four—digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific industrial sources your installation handles. Use additional sheets if necessary.
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C. COMMERCIAL CHEMICAL PRODUCT HAZARDOUS WASTES. Enter the four—digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.
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Beck Drum Cempany, Inc. 610 Flerida Avenue rfelk, Va. 23513



P09 3133836 MAIL

EPA - REGION III P.O. BOX 1460 PHILADELPHIA, PA 19170

RETURN RECEIPT REQUESTED

ARDOUS WASTE
IT APPLICATION

BOCK DRUM COMPANY, INC.



2610 FLORIDA AVENUE NORFOLK, VIRGINIA 23513

PHONE 855-0549



February 13, 1981

Ms. Shirley D. Bulkin
Chief, RCRA Administrative Support Section
United States Environmental Protection Agency
Region III
6th and Walnut Streets
Philadelphia, Pennsylvania 19106

Re: Hazardous Waste Permit Application - Missing Information

EPA I.D. Number: VAD023831316

Dear Ms. Bulkin:

The information that has been passed on since November
18, 1980 has negated our need for a permit. This letter serves
as official notice of our withdrawal of application.

Sincerely yours,

Ronald H. Bock

Bock Drum Company, Inc.

RHB/dsm

change 2/17/8/

(fill-in areas are spaced for elite type, i.e., 12 characters/inch	SHIMMS WE WANTED				Form Approved OMB No. 1	58-RC)175		
FORM 1 GENERAL INFORMATION					I. EPA I.D. NUMBER				
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II. POLLUTANT CHARACTERISTICS	259.5		A hos	an with the last the last	TO THE STATE OF				
INSTRUCTIONS: Complete A through J to determine we questions, you must submit this form and the supplement if the supplemental form is attached. If you answer "no" is excluded from permit requirements; see Section C of the	tal for	m lis	sted in the uestion, y	e parenthesis following the que ou need not submit any of the	estion. Mark "X" in the box in se forms. You may answer "no	the th	our a	olumn	
SPECIFIC QUESTIONS	N CHICAGOMAN AN	IAR NO	FORM ATTACHED	SPECIFIC	QUESTIONS	YES	SE MARKETON SERVICE	FORM ATTACHE	
A. Is this facility a publicly owned treatment works which results in a discharge to waters of the U.S.? (FORM 2A)		x		include a concentrated	(either existing or proposed) animal feeding operation or on facility which results in a busy (FORM 28)	19	x		
C. Is this a facility which currently results in discharges to waters of the U.S. other than those described in A or B above? (FORM 2C) E. Does or will this facility treat, store, or dispose of hazardous wastes? (FORM 3)		17 X	18	D. Is this a proposed facility (other than those described in A or B above) which will result in a discharge to waters of the U.S.? (FORM 2D)			X 26	21	
		23 X	24	F. Do you or will you inject municipal effluent below taining, within one qua	Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore, underground sources of drinking water? (FORM 4)			27	
G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4)	Was a	29 X	36	H. Do you or will you inject cial processes such as me process, solution mining	t at this facility fluids for spe- ining of sulfur by the Frasch of minerals, in situ combus- covery of geothermal energy?	31	X 38	33	
 Is this facility a proposed stationary source which is one of the 28 industrial categories listed in the in- structions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an 		X		NOT one of the 28 ind instructions and which we per year of any air pollut Air Act and may affect of	ed stationary source which is ustrial categories listed in the vill potentially emit 250 tons ant regulated under the Clean or be located in an attainment		x	200	
attainment area? (FORM 5) III. NAME OF FACILITY	40	41	42 14 - 14 D	area? (FORM 5)		43	44	45	
1 SKIP BOCK DRUM COMPY 13 16 - 29 30 IV. FACILITY CONTACT A. NAME & TITLE (last, fin	rst, & t	itle)			. PHONE (area code & no.)	69	in the state of th		
V. FACILITY MAILING ADDRESS			Maryal	45 46 -	48 49 - 51 52 - 55	TEXT	SI		
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VI. FACILITY LOCATION A. STREET, ROUTE NO. OR OTHER S	PECIF	IC I	DENTIFI	AND DESCRIPTION OF THE PERSON	·51				
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B. COUNTY NAME N/A	1 1	1 1	11				his bis		

C. CITY OR TOWN

F. COUNTY CODE

D.STATE E. ZIP CODE

CONTINUED FROM THE FRONT					
VII. SIC CODES (4-digit, in order of priority)					
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15 16 - 19		15 16 -	19		
C. THIRD				D. FOURTH	
c (specify)		c	(specify)		
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VIII. OPERATOR INFORMATION					
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c			11111		owner?
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C. STATUS OF OPERATOR (Enter the	appropriate letter into the i	answer box; if "Oth	her", specify.)	D. PHONE	(area code & no.)
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X. EXISTING ENVIRONMENTAL PERMITS			THE REAL PROPERTY.	THE REPORT OF	
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XI. MAP	A STATE OF THE STA			ALERT STREET	
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the outline of the facility, the location o					
treatment, storage, or disposal facilities, water bodies in the map area. See instruct			naergrouna. Inc	clude all springs, rivers	and other surface
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XII. NATURE OF BUSINESS (provide a brief de	scription	والمستوال والأرام والمالية			
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false information, including the possibility					
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BOCK DRUM COMPANY, ING.



2610 FLORIDA AVENUE NORFOLK, VIRGINIA 23513

PHONE 855-0549



Nevember 18, 1980

EPA - Region III P. O. Box 1460 Philadelphia, Pa. 19170

Dear Sirs:

This application for permit is filed under protest. We are steel drum reconditioners, engaged in the recovery of valuable containers.

Being in doubt as regards our need to apply for an EPA I.D. number, because of the nature of our business, we contacted Bill Walsh, EPA, via phone November 17, 1980. We were informed that we could be classified in the broader sense, as a generator of hazardous waste because of residuals left in our tanks by our washing operations, we did not, however, fall within the "processing" category.

Because of ambiguities in the regulations of May 19, 1980, it is possible that under extreme interpretations, certain of our activities might be construed as hazardous waste "treatment" requiring an EPA permit. While we disagree with such interpretations, in the absence of timely agency clarification this application is being filed to preserve interim operating status.

Sincerely yours,

Renald H. Beck

Beck Drum Cempany, Inc.

RHB/dsm

CC: C. Payne, atterney
L. Bierlein, atterney
N.A.B.A.D.A.

(Reconditioned or New - Drums - Fibers - Pails)

ACKNOWLIDGEMENT SENT DATE:

		INTERNAL CHECKLIST	DF05	IL:	
Dat	e se	ation's Name: BOCK DRUM CO #: VAD-02-383-1316 ent for missing info: 1116/8)	Inc RCRA SE EPA REG	ECTION REGILATION CHECK 41	edle
I.	Int	erim Regulatory Requirements			
	Α,	(1) FORM 1 MISSING]	
		(2) FORM 3 MISSING		1	
	В.	POSTMARK after NOVEMBER 19, 1980		Valid	
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		(2) DATE of OPERATION after NOVEMBER 19,	1980		
	D.	(1) NON-MOTIFIER	i C	I	
		(2) NOTIFIED after AUGUST 18, 1980		Valid	
	Ε.	(1). FORM 1, VIII B SIGNATURE			
		(2) FORM 3, IX B SIGNATURE]	
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2.		HANDLER			
	В.	NONREGULATED			
	C.	UNSURE			
	D.	UNKNOWN FACILITY (missing name and address on Form 3)			
	Ε.	NEW FACILITY			
	F.	CORE ITEM(S) MISSING			
	G.	NON-CORE ITEM(S) MISSING			
	н.	OTHER			

NOTE: Items checked indicates missing information

2.

LAWRENCE W. BIERLEIN, P.C.

1.AW OFFICES
910 SEVENTEENTH STREET, N. W.
WASHINGTON, D.C. 20006

(202) 659-9475

August 4, 1980

To: Members, National Barrel & Drum Association

Re: Notification to EPA of Hazardous Waste Activity

Every member of the drum reconditioning industry should attach this memo to their notification to EPA of involvement in hazardous waste activity.

EPA unofficially has advised this industry that an "empty" container, that formerly contained a material that would fall within the classification of hazardous waste, is not itself a hazardous waste unless the material is one of those listed in new Section 261.33(e).

EPA has refused to publish a formal acknowledgement of this position in the Federal Register, with any explanation of the term "empty," before the mandatory notification date of August 18.

Prudent business practice, therefore, compels every handler of "empty" packaging to give notice by August 18, 1980, of direct involvement in the generation, transportation, storage, treatment and disposal of every conceivable material that might be handled. EPA's failure to provide essential clarification in a timely manner forces this approach, even though many who give notice may not in fact be so engaged in waste handling. Where the regulations and the agency leave only doubt, commercial survival demands notification.

Sincerely,

Lawrence W. Bierlein General Counsel